CEL SCI CORP Form 4 July 28, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

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Expires:

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1(b).

| 1. Name and Address of Reporting Person * CIPRIANO JOHN | | | 2. Issuer Name and Ticker or Trading Symbol CEL SCI CORP [cvm] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
|---|---------------------------------------|-----------|---|--|---|--------|-----------------------|--|---|---|--|--|
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction | | | | (Check an applicable) | | | | | |
| | | | (Month/D | ay/Year) | | | | Director | | Owner | | |
| 8229 BOONE BLVD, SUITE 802 | | | 07/27/2015 | | | | | X Officer (give title Other (speci below) | | | | |
| (Street) | | | 4. If Ame | 4. If Amendment, Date Original | | | | | 6. Individual or Joint/Group Filing(Check | | | |
| | | Filed(Mon | Filed(Month/Day/Year) | | | | | Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting | | | | |
| VIENNA, V | VA 22182 | | | | | | | Person | More than One Re | porting | | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative S | ecurit | ies Acq | uired, Disposed o | f, or Beneficial | ly Owned | | |
| 1.Title of Security (Instr. 3) | ty (Month/Day/Year) Executi 3) any | | emed ion Date, if /Day/Year) | 3. Transactio Code (Instr. 8) | 4. Securities Acquired of (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | (D) or Be Indirect (I) Ov | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common Stock | 07/27/2015 | | | A | 14,618 | (D) | \$ 0.54 | 1,614,618 | D | | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of | 2. | 3. Transaction Date | | 4. | 5. | 6. Date Exerc | | 7. Title a | | 8. Price of | 9. Nu |
|--------------------------------------|---|---------------------|---|-----------------|---|---------------------|--------------------|---------------------|--|---------------------|--|
| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Code (Instr. 8) | onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | Securitie | Underlying Securities (Instr. 3 and 4) | Security (Instr. 5) | Deriv Secur Bene Owne Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | or Title N of | umber | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

CIPRIANO JOHN 8229 BOONE BLVD SUITE 802 VIENNA, VA 22182

Senior Vice President

Signatures

John Cipriano 07/28/2015

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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